## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

.000	DIVISION OF CO	RPORATIO	1112	***		M 1 . 10
1. Name of Limited Partnership	1a. DOCUMENT # <b>A33320</b>		98 DEC 14 PM 4: 19			
BAYTREE GOLF & COUNTRY CLUB, LTD.						
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital	Contributions as on record.
575 S. WICKHAM RD., STE. E	575 S. WICKHAM RD., STE, E	575 S WICKHAM DO STE E		08/13/1992		
WEST MELBOURNE FL 32904	WEST MELBOURNE FL 32904			3a. Date of Last Report	\$450,000.00	
				12/17/1997	5b. Amount	t of Capital utions in FLORIDA
2. Mailing Address				4. State or Country of Formation	Contributo date:	utions in FLORIDA
Z. Mailing Address	Za. Principal Office Address	2a. Principal Office Address		FL	15	0,000.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6, FEI Number		Applied For
City & State	City & State			59-3139159	Ţ	Not Applicable
Zip Country	7in Country			7. Certificate of Status Desired		\$8.75 Additional Fee Required
Z.p Country	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information)			
				40		
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office				
CLARK, COY A.		Notife				
575 S. WICKHAM RD., STE. E		Street Address (P.O. Box Number Is Not Acceptable)				
WEST MELBOURNE FL 32904		Sulte, Apt. #, etc.				
		City FL ZIp Code				
10a. Pursuant to the provisions of sections 620.1051 and 6 for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of the control	istered agent, or both, in the State of Florida.					
SIGNATURE (Registered Agent Accepting Appointment)				DATE	1. 1.	
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.						
11. Name(s) of General Partner(s)	11a. Address of Each General P	Partner Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number
CLARK, COY A.	575 S. WICKHAM RD., S		WES	T MELBOURNE FL 329		

WOST DE REGISTERED AND ACTIVE WITH THIS OFFICE.						
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number			
CLARK, COY A.	575 S. WICKHAM RD., S	WEST MELBOURNE FL 329				
BAYTREE DEVELOPMENT CORP	575 S. WICKHAM RD., S	WEST MELBOURNE FL 329	S41137			
			7222603. /9801081023			
•		事事事 <b>来</b> 气()				

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby cartify that the Information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

empowered to execute this report as required by chapter 620, Florida Statutes.			
SIGNATURE Con C. Clar	DATE 12:11:98		
Typed or Printed Name of General Partner Signing Form	Daylime Telephone Number		